CITY OF MESA, ARIZONA POLICE DEPARTMENT
Records Section, PO Box 1466, Mesa, AZ 85211-1466

PUBLIC RECORDS REQUEST

	Home Phone #:
	Business Phone #:

_____ Ave   City: Somerville   State: MA   Zip: 02144

I hereby certify under penalty of perjury that the requested records
will not be used for commercial purpose as defined in ARS 39.121.03

Your signature: _____   Date: _____

Video Files: Will be redacted and/or blurred in accordance with public records laws.

NO REFUNDS: After payment is received and record is released to requestor.

The following information is required before a records search will be conducted for your information.

PLEASE "_PRINT_" CLEARLY

Purpose of Request: ( ) Victim ( ) Witness ( ) Insurance Claim
(X) Other: Please explain your reason for this request _____ Media _____

Type of Report : ( ) Traffic Accident (X) Crime Type: _Various Reports_ ____ ( ) Mesa Adult Arrest Record Search

Police Report Number: _18 Reports Involving J.T. Ready_

Date & Time Reported to Police: _Various_

Exact Date, Time, Location of Incident: _Various_

Person on Record: _____	Nature of Incident: ( ) Accident ( ) Accident with Injury
Date of Birth: _____	( ) Assault ( ) Auto Theft ( ) Bicycle Theft ( ) Burglary
Social Security #: _____	( ) Theft ( ) Recovery ( ) Other: _____

REQUESTER, DO NOT WRITE BELOW THIS LINE

Amount Received $ _90.00_ Payment received in form of: Cash _____   Check _90.00_   Other _____

Initials & I.D. # of employee receiving request: _NR 17262_

Date: _4-25-19_   Mail Record _____ X _____ Will Pick-Up _____

( ) Enclosed is the Mesa Adult Arrest Record you requested.
( ) Enclosed is the record you requested. The record was not edited.
( ) Per Arizona Supreme Court guidelines, the attached record has been edited due to:

    ( ) Ongoing criminal investigation.   ( ) Confidentiality rights of individuals named within.
    ( ) Privacy right of individuals named.   ( ) The release of investigative techniques or other matters
                                                      may be detrimental to the best interest of the State.

( ) No record found based on the information you provided. Your refund of $ _____ is enclosed.
( ) This incident occurred out of Mesa Police jurisdiction. Contact _____
( ) Other _____

Initials & I.D. # of Records Tech Processing:

Date Processed:	Mailed Record Request _____ Placed at pick-up window _____
Records Shift Supervisor:	

White – MPD File Copy   Yellow – Customer Copy   Pink – Accounting Copy
DPM 3.3.70F1   REV 6/6/17